



**Washington State
Liquor Control Board**

Licensing and Regulation Division
PO Box 43098
Olympia WA 98504-3098
Phone: (360) 664-1600
FAX: (360) 753-2710
www.liq.wa.gov

License Number _____

Trade Name _____

UBI Number _____

Tied-House Participation Statement

Effective July 26, 2009, changes to RCW 66.28.010 (the Tied-House law), allow licensees to conduct business in all three tiers: producer/manufacturer, distributor, and retailer. This form identifies any other liquor licensed entity(ies) in which you have financial interest, and the percentage of ownership you have in each entity.

Please complete, sign, and return this form. For questions, contact your investigator.

1. Do you have any financial interest in other liquor businesses that manufacture, import, distribute, or sell at retail, alcoholic beverages?
 - a. ☐ Yes (If "yes," please respond to questions 2 and 3)
 - b. ☐ No (If "no," please sign and return of this form)
2. Retail liquor licensees (grocery store, restaurant, etc.): If you are applying for a retail liquor license, do you have any financial interest, directly or indirectly, in any non-retail liquor business that manufactures, imports, or distributes (brewery, winery, distillery or other liquor supplier) alcoholic beverages?
 - a. ☐ Yes (If "yes," please complete page two)
 - b. ☐ No (If "no," please sign and return of this form)
3. Non-Retail liquor licensees (brewery, winery, etc.): Do you have any financial interest in any liquor business that sells liquor to consumers directly (retail liquor businesses)?
 - a. ☐ Yes (If "yes," please complete page two)
 - b. ☐ No (If "no," please sign and return of this form)

By signing this form, I acknowledge my understanding of the above; submission constitutes compliance with this information-gathering request. It is lawful for an industry member to have direct or indirect financial interest in another industry member or a retailer unless the interest has resulted in (or is more likely than not to result in) undue influence over the retailer or industry member, or has an adverse impact on public health and safety.

Print Name

Title

Signature of Sole Proprietor, Partner, Spouse,
Officer, Stockholder, LLC member/manager

Date



License Number _____

Trade Name _____

UBI Number _____

Tied-House Participation Statement List of Business Interests

Please list all liquor-licensed businesses in which you have financial interest, including your percentage of ownership:

Name of Business #1 (trade name): _____

What is your percentage of ownership? _____%

Liquor license number _____ UBI number _____ and the licensed entity
(corporation, LLC, partnership etc.) _____

Name of Business #2 (trade name): _____

What is your percentage of ownership? _____%

Liquor license number _____ UBI number _____ and the licensed entity
(corporation, LLC, partnership, etc.) _____

Name of Business #3 (trade name): _____

What is your percentage of ownership? _____%

Liquor license number _____ UBI number _____ and the licensed entity
(corporation, LLC, partnership, etc.) _____

Name of Business #4 (trade name): _____

What is your percentage of ownership? _____%

Liquor license number _____ UBI number _____ and the licensed entity
(corporation, LLC, partnership, etc.) _____

Please use additional blank sheets if needed.